

1 UNITED STATES DISTRICT COURT  
2 FOR THE SOUTHERN DISTRICT OF NEW YORK

3  
4 UMB BANK, N.A., as Trustee, :  
5 : No. 15 Civ. 08724 (GBD)  
6 Plaintiff, :  
7 vs. :  
8 :  
9 SANOFI, :  
10 Defendant. :  
11  
12

13 \*\* HIGHLY CONFIDENTIAL \*\*

14 VIDEO DEPOSITION OF CHRISTOPHER VIEHBACHER

15  
16 Wednesday, August 29, 2018

17  
18 WEIL, GOTSHAL & MANGES LLP

19 100 Federal Street

20 Boston, Massachusetts  
21  
22  
23

24 Reported by: Deanna J. Dean, RDR, CRR

25 Job No: 146793

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basis.

Q. Do you know what material nonpublic information is?

A. I do.

Q. You know that it's illegal to buy and sell securities based on material nonpublic information?

A. I do.

Q. Am I correct that prior to your association with Gurnet Point Capital, you spent approximately 20 years at GlaxoSmithKline, ending up as head of their US pharma?

A. That's correct.

Q. And then in approximately 2008, you became chief executive officer of Sanofi?

A. That's correct.

Q. And you remained Sanofi's chief executive officer from 2008 until October 29, 2014?

A. That's correct.

[REDACTED]

[REDACTED]

[REDACTED].

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2 entire obligation of the company, so the CVR  
3 and the debt in total.

4 Q. And if the credit ratings went down,  
5 would that, all other things being equal, have  
6 a negative effect on the borrowing costs of  
7 Sanofi?

8 A. Not necessarily. Actually, I think  
9 if you lose a notch, as the terms are used, it  
10 doesn't necessarily have a material impact. So  
11 it would depend on exactly what the impact of  
12 the credit rating is.

13 Q. Were you a principal negotiator of  
14 the CVR agreement?

15 A. Yes. I was heavily involved  
16 personally.

17 Q. Were there others who you would  
18 credit as having been heavily involved in the  
19 negotiations of the CVR agreement?

20 A. A lot of the detail of the  
21 negotiations was done banker to banker and  
22 lawyer to lawyer. In addition, my chief  
23 financial officer and my general counsel and I  
24 would meet daily, basically to discuss where we  
25 were with the project of the acquisition in

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2 Q. Let me show you what has already  
3 been marked as Plaintiff's Exhibit 106.

4 A. Thank you.

5 Q. I'll represent to you, sir, that it  
6 is the contingent value rights agreement by and  
7 between Sanofi and the American Stock Transfer  
8 and Trust Company, the initial trustee, dated  
9 as of March 30, 2011, sir.

10 A. All right.

11 Q. During your employment with Sanofi,  
12 did you ever read this CVR agreement cover to  
13 cover?

14 A. I can't recall. I probably did.

15 Q. Did you ever read a summary of the  
16 agreement?

17 A. We had numerous summaries that we  
18 presented, for example, to our own board of  
19 directors and to outside investors, yes.

20 Q. Okay. And did you read them?

21 A. I did.

22 Q. When most recently have you reviewed  
23 the CVR agreement?

24 A. I can't recall. Not for years.

25 Q. So it was not one of the documents

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2 forecasts. So -- and that would lead you to a  
3 probability of whether you were going to pay  
4 out a CVR or not.

5 Q. Okay. And do you recall, boiling it  
6 down, whether Sanofi thought at the time the  
7 deal was approved that any of the CVR  
8 milestones would be achieved?

9 A. Yes. As I recall, at least in my  
10 personal opinion at the time, that we ascribed  
11 very high probability to the approval milestone  
12 and a high probability to the first sales  
13 milestone of \$400 million. Our own sales  
14 forecasts peaked at around -- they certainly  
15 peaked at less than the 1.8 billion, which was  
16 I think the next sales milestone.

17 So we saw the higher sales  
18 milestones as being less than probable, and  
19 really from the time we did due diligence, I  
20 felt that the milestone for manufacturing would  
21 not be made because the -- we believed that the  
22 forecasts that management had made on the basis  
23 of manufacturing quantities were way  
24 overoptimistic.

25 MR. GILMAN: Mr. Neuwirth, may we

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2 CVRs?

3 A. Yes.

4 Q. And you had a role in that?

5 A. I was involved and I would have  
6 approved the acquisition of shares -- of CVRs,  
7 yes.

8 Q. Okay. And in November of 2011, what  
9 caused you to decide to go into the market and  
10 buy up CVRs?

11 A. It was our view that the CVR value  
12 as traded on the stock exchange was lower than  
13 our expected net present value of what we  
14 thought the CVR was worth. So we decided to  
15 buy up CVRs at what we deemed to be a lower  
16 price than what they were worth. That would  
17 have indicated that we had a higher expectation  
18 of Lemtrada sales than the market.

19 Q. Okay. And looking at the second  
20 document which begins with the page numbered  
21 473, do you see there that as of January 3,  
22 2012, Sanofi authorized Morgan Stanley again to  
23 buy up CVRs?

24 Again, with an expiration of the  
25 time frame here, February 8, 2012, but again

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A. Yes.

Q. And you authorized that?

A. I did.

Q. And you authorized that because you thought that the CVRs were worth more than what Sanofi was paying?

A. Yes. That turned out to be wrong, but that's what I thought at the time.

MR. GILMAN: I'd like the reporter to mark as Exhibit 537 a document produced by Sanofi bearing production numbers SAN-CVR013055821 through 822.

John, may we have a stipulation that Plaintiff's Exhibit 536 is authentic --

MR. NEUWIRTH: Yes.

MR. GILMAN: -- and a document of a regularly conducted business activity?

MR. NEUWIRTH: And yes.

MR. GILMAN: Thank you.

(Plaintiff Exhibit 537 marked for identification.)

BY MR. GILMAN:

Q. Sir, let me explain to you what you have in your hand as Exhibit 537. It is a

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2 [REDACTED]  
3 [REDACTED]  
4 [REDACTED]  
5 [REDACTED]  
6 [REDACTED]  
7 [REDACTED]  
8 [REDACTED]  
9 [REDACTED]  
10 [REDACTED]  
11 [REDACTED]  
12 [REDACTED]  
13 [REDACTED]

14 Q. Sir, you mentioned how efficacious  
15 Lemtrada is with certain populations. Are you  
16 aware that with respect to the remitting  
17 relapsing form of MS, that certain patients  
18 treated with Lemtrada have gone five years  
19 without any MS symptoms?

20 A. I am aware. I have met some of  
21 those patients.

22 Q. And that's as close to a cure as  
23 anyone wants to use the C word?

24 A. It is. It's actually one of the  
25 main reasons I was so positive about Lemtrada.



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2 A. I'm afraid I don't recall who any of  
3 these people are or what this is dealing with.

4 MR. GILMAN: John, could you put in  
5 front of the witness Plaintiff's Exhibit  
6 106, the CVR agreement.

7 Thank you.

8 Q. Sir, could you turn to page 43. And  
9 do you see section 7.10 on the bottom of  
10 page 43 and which reads, "Milestones. The  
11 company shall use diligent efforts to achieve  
12 the approval milestone and the product sales  
13 milestones and shall use commercially  
14 reasonable efforts to achieve the production  
15 milestone on a timely basis"?

16 A. I see that.

17 Q. And I read that correctly?

18 A. Yes.

19 Q. The company is Sanofi?

20 A. Yes.

21 Q. Did you have any role in the  
22 negotiation of this provision?

23 A. There were some discussions around  
24 that and I did have some involvement with this.

25 Q. Okay. Do you agree, when it says

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2 Q. All right. Now, you've gone through  
3 what "diligent efforts" means. You've gone  
4 through the specific items that it shall  
5 include.

6 Did you ever issue any written  
7 instructions to the Sanofi workforce as to what  
8 Sanofi's obligations of diligent efforts were  
9 under the CVR agreement?

10 A. Personally? I don't recall. I  
11 don't think I did.

12 Q. Did you ever hold a meeting where  
13 you gave a speech on that subject?

14 A. Me, personally? No.

15 Q. Did you ever issue written  
16 instructions to the workforce on what they  
17 needed to do to honor Sanofi's obligations  
18 under the CVR agreement to use diligent  
19 efforts?

20 A. No, I don't think that was my role.

21 Q. Okay. Did you ever issue oral  
22 instructions to anybody as to what had to be  
23 done to honor the obligations under the CVR  
24 agreement to use diligent efforts?

25 A. I wouldn't call them instructions,

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but, obviously, this was a strategically important product for Sanofi and we wanted to make sure we had -- as was Aubagio. And, you know, really building the multiple sclerosis franchise within Genzyme was a core part of really utilizing what I perceived were Genzyme's real skill in selling specialty medicine. You know, you had to have a high degree of technical competence, credibility with physicians, and I had seen Genzyme do that with rare diseases and felt that they could do that with MS. So if you think about the whole -- the acquisition, the idea was to be able to use Genzyme also as a platform for launching specialty products.

So this was a, you know, pretty visible, pretty important part of the growth strategy of the company. So, yes. I mean, diligent efforts, I mean, we clearly wanted to make sure that this product was going to be a success, as was Aubagio. And I have to say, when I look at the sales, they have been.

Q. Did you ever direct that copies of the CVR agreement be distributed within Sanofi?

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2 A. I did not personally direct that.

3 Q. Did you ever direct that a summary  
4 of any aspect of the CVR agreement be  
5 distributed within Sanofi?

6 A. I did not direct that.

7 Q. Did you ever put any committee or  
8 any individual or any group in charge or  
9 responsible for monitoring Sanofi's compliance  
10 with its diligent efforts obligation?

11 A. That was part of our -- we have a  
12 whole compliance department, yes. There, you  
13 have the whole legal department and the  
14 compliance department look at that.

15 For us, though, you know, what  
16 diligent efforts is defined at is exactly what  
17 anyone who is a professional in this industry  
18 would do. And so, in my view, as long as we  
19 were doing what anyone with experience in  
20 launching products would do, that we were in  
21 compliance. And that was -- it was in our  
22 financial interest to do so. If that had not  
23 been the case, we had plenty of opportunity for  
24 people to flag that this wasn't going on. I  
25 mean, there are always marketing reviews and

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2 All I can answer you, sir, is that  
3 it looks like we achieved the objectives we set  
4 out for ourselves, and therefore the resources  
5 and the approach were appropriate.

6 Q. Did you believe that Sanofi was  
7 under some timetable to achieve results with  
8 Lemtrada?

9 A. We had quarterly results, sir. We  
10 had to make sure that those results came in as  
11 quickly as they could.

12 Q. And that's what governed your  
13 conduct?

14 A. We were measured quarterly on our  
15 results, so, yes, we had to have a sense of  
16 urgency in everything we did.

17 Q. Did you think the CVR agreement gave  
18 you an extra sense of urgency?

19 A. No. The CVR agreement, again, as I  
20 will tell you, when you negotiate those -- and  
21 I was personally involved with that -- I think  
22 I once said publicly that if we had to make the  
23 last milestone payment, I would bring the check  
24 personally to the former CEO of Genzyme with a  
25 bottle of his favorite wine. Because if we

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2 let's count real sales, so once you've got a  
3 certain run rate and once you've got  
4 reimbursement, which we accepted. It's not an  
5 unusual request.

6 Q. And that would be to avoid missing  
7 out on a payment because of a technicality?  
8 You want a real effort?

9 A. Well, no --

10 MR. NEUWIRTH: Objection to the  
11 form.

12 Go ahead.

13 A. Not -- no, I don't think so. You  
14 know, if you launch, for instance, in December,  
15 you know, it's Christmas time in most  
16 countries. And if you launch in September,  
17 most physicians are busy doing other things.  
18 Most patients are doing other things. And you  
19 could have reimbursement, but you're probably  
20 not going to sell very much because you're not  
21 really having much impact out there. Or you  
22 could launch, you have reimbursement, but  
23 there's a delay in getting the product all the  
24 way through. You know, this is -- if you think  
25 about it, each one of these vials, if I

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2 remember, was worth, you know, 4 or \$5,000. So  
3 these aren't sitting on the shelf of your local  
4 pharmacy. You have to have a special  
5 distribution channel to make sure that when  
6 patients come in that the product was available  
7 since they wouldn't otherwise be there.

8 So they just wanted to make sure  
9 that, you know, when we actually got a launch  
10 that we weren't launching in one of these  
11 funny -- or -- not that we would do it. It's  
12 just -- it's not really representative of what  
13 the sales were going to do. So in this case,  
14 if you launched in December and there's not  
15 many physicians to go see, then, you know,  
16 you'd actually start in January and say, okay,  
17 you've kind of got the pipeline, the  
18 distribution channel filled. You've got your  
19 reps out there and running. And then, you  
20 know, how do you define that -- you know, they  
21 said 200 scripts. I think we didn't actually  
22 end up taking that. But, you know, there was  
23 the principle of making sure it was, you know,  
24 a really representative quarter, if you like.

25 Q. Okay.

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2 R&D. More cost reduction. Decrease of fixed  
3 cost. Wish to hear more about RD.

4 Do you see those references?

5 A. I do. That's the second email.  
6 Correct? Yeah.

7 Q. And, sir, does that refresh your  
8 recollection that the investors that Sanofi was  
9 meeting with in the spring of 2011 with respect  
10 to the Genzyme acquisition were urging more  
11 cost cutting at Sanofi?

12 A. Well, I see, first of all, a lot of  
13 questions around revised guidance, more cost  
14 cutting, medium growth outlook. So are you  
15 going to cut more cost does not sound like a  
16 demand for more cost cutting, if I may say.

17 Second is this is in March of 2011,  
18 so it's just immediately after the announcement  
19 of the Genzyme deal, at which we had promised,  
20 I believe, \$700 million of cost synergies to  
21 come out of the -- out of the company.

22 So they would have been asking about  
23 those kind of cost synergies. But I don't see  
24 anything that's particularly different than  
25 anytime in my tenure as CEO.



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2 Q. And in bullet -- in point three, he  
3 states, "Where we're going. Now could be a  
4 turning point for Genzyme in multiple  
5 sclerosis. Launch of Lemtrada in the US is a  
6 make-or-break moment for Genzyme. The whole  
7 world of Genzyme multiple sclerosis will be  
8 looking to Lemtrada US. A rare opportunity  
9 with blockbuster potential. Hurdle: It  
10 doesn't sell itself. Opportunity: We can  
11 determine its success."

12 Have I read that correctly?

13 A. You have.

14 Q. Blockbuster potential. Is  
15 "blockbuster" a word common in the pharma  
16 community for a certain level of sales?

17 A. It is.

18 Q. And what level of sales does it  
19 refer to?

20 A. A billion.

21 Q. A billion a year?

22 A. A billion a year.

23 Q. So Mr. Sibold is saying that  
24 Lemtrada has the potential to be a blockbuster,  
25 billion a year in annual sales, and that the

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2 business. There was a renal care division,  
3 there was a biosurgery division, and there was  
4 an autologous cell business for making  
5 cartilage patches for knees. And we felt that  
6 those businesses would be better off in Sanofi  
7 and that would include the production.

8 However, because production  
9 leadership was focused on fixing the problems  
10 at Cerezyme -- for Cerezyme and Fabrazyme, we  
11 felt that we shouldn't undertake any  
12 integration activities within the production  
13 division because that could risk distraction on  
14 fixing the Fabrazyme and Cerezyme issues.

15 MR. NEUWIRTH: Thank you. I have  
16 nothing else.

17 MR. GILMAN: That's it.

18 THE VIDEOGRAPHER: We are off the  
19 record at 4:08 p.m.

20 (Witness excused and deposition  
21 concluded at 4:08 p.m.)  
22  
23  
24  
25